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PICK-UP	MAIT WAIT	MAIL
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Certified Copies	Certificate	s of Status
		
Special Instructions to Fil	ling Officer:	

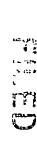
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COVER LETTER

TO:	New Filing Section Division of Corporations		
OF III	ECT: PMU Launch LLC		
SOBI	(Name of	Resulting Florida Lim	ted Company)
		_	ion, and fees are submitted to convert an "Other y" in accordance with s. 605.1045, F.S.
Pleasc	return all correspondence concern	ning this matter to:	
D. Ma	thew Blackburn		
	(Contact Person)		_
The La	aw Office of D. Mathew Blackburn		
	(Firm/Company)		-
9800 F	Pyramid Ct Ste 400		
	(Address)		
Engle	wood CO 80112		
	(City, State and Zip Cod	e)	-
mathe	w@dmblackburn.com		_
E-n	nail Address: (to be used for future annua	l report notifications)	_
For fu	rther information concerning this	matter, please call:	
D. Ma	thew Blackburn	at (⁷²⁰	213-6204
	(Name of Contact Person)		(Daytime Telephone Number)
	sed is a check for the following an s and drawn on a bank located in t		processed by this office must be payable in US
(\$25 fo & \$125	0.00 Filing Fees r Conversion for Articles mization) \$155.00 Filing Fee and Certificate of Status	es S180.00 Filing and Certified Co	
	Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company



The Articles of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: PMU Launch LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liability Company (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
09/28/2020
on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
PMU Launch LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after
the date this document is filed by the Florida Department of State.)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

- 5. The plan of conversion has been approved in accordance with all applicable statutes.
- 6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

\$125.00

\$30.00 (Optional)

\$5.00 (Optional)

Certified Copy:

Certificate of Status:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

PMU Launch LLC		
(Must contain the words)	Limited Liability Company, "L.L.C.," or "L1,C,")	
ARTICLE II - Address:		
The mailing address and street address	ress of the principal office of the Limited Liabil	lity Company is:
Principal Office Address:	Mailing Address:	
Thirtipat Office Address.	Maning Address.	
14746 Via Estrella PI Apt 304		
Tampa FL 33626		
(The Limited Liability Company cannot serve business entity with an active Florida registral		or another
(The Limited Liability Company cannot serve business entity with an active Florida registral	is its own Registered Agent. You must designate an individual ion.)	or another
(The Limited Liability Company cannot serve business entity with an active Florida registral	is its own Registered Agent. You must designate an individual ion.)	or another
(The Limited Liability Company cannot serve business entity with an active Florida registrates). The name and the Florida street address.	is its own Registered Agent. You must designate an individual ion.)	or another
(The Limited Liability Company cannot serve business entity with an active Florida registrates). The name and the Florida street address.	is its own Registered Agent. You must designate an individual ion.) Iress of the registered agent are: Name	5EC 7. To 84
The Limited Liability Company cannot serve business entity with an active Florida registral. The name and the Florida street addressed Renato Oliveira 14746 Via Estrel	is its own Registered Agent. You must designate an individual ion.) Iress of the registered agent are: Name	or another 2023 NOV 27
The Limited Liability Company cannot serve business entity with an active Florida registral. The name and the Florida street addressed Renato Oliveira 14746 Via Estrel	Is its own Registered Agent. You must designate an individual ion.) Iress of the registered agent are: Name Name API Apt 304	or another

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

Registered Agent's Signature (REQUIRED)

Cense Oleven

(CONTINUED)

ARTICI	JE IV-	
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The name and address of each person authorized to manage and control the Limited Liability Company:

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager MGR	Renato Oliveira
<u>IVIGR</u>	
	14746 Via Estrella PI Apt 304 Tampa FL 33626
	Tallipa FL 33020
MGR	Kyle Koschel
	14746 Via Estrella PI Apt 304
	Tampa FL 33626
	7023 TA
	ー
	——————————————————————————————————————
(Use attachment if necessary)	AHII: 5 OF STA: SEE, FL
LE V: Other provisions, if any.	[*,
REQUIRED SIGNATURE:	
Signature of a member or This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes, I am aware the ment to the Department of State constitutes a third degree felo
Renato Oliveira	
Ty	ped or printed name of signee
	Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional) \$5.00 Certificate of Status (Optional)